Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
EASTERN DISTRICT OF WASHINGTON	_	
Case number (if known)	_ Chapter you are filing under:	
	Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	Check if this is an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a joint case—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pai	art 1: Identify Yourself					
		About Debtor 1:		About Debtor 2 (Spouse Only in a Joint Case):		
1.	Your full name					
	Write the name that is on your government-issued picture identification (for example, your driver's license or passport). Bring your picture identification to your meeting with the trustee.	Bradley First name D Middle name Hibner Last name and Suffix (Sr., Jr., II, III)		First name L Middle name Hibner Last name and Suffix (Sr., Jr., II, III)		
2.	All other names you have used in the last 8 years Include your married or maiden names.					
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-1843		xxx-xx-7188		

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		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):	
4.	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names	I have not used any business name or EINs. Business name(s) EINs	■ I have not used any business name or EINs. Business name(s)	
5.	Where you live	11011 E 4th Ave Spokane, WA 99206	If Debtor 2 lives at a different address:	
		Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code	
		Spokane County	County	
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.	
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code	
6.	Why you are choosing this district to file for bankruptcy	Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. I have another reason. Explain. (See 28 U.S.C. § 1408.)	Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. I have another reason. Explain. (See 28 U.S.C. § 1408.)	

	otor 1 otor 2	Bradley D Hibner Mourney L Hibner					Case number (if known)	
Par	t 2:	Tell the Court About \	our Bank	ruptcy Ca	ise			
7.	Bankruptcy Code you are (Form 2010)). Also, go to the top of page 1 and check the appropriate box.							
	choc	sing to file under	■ Chap	ter 7				
			☐ Chapt					
			☐ Chapt					
			☐ Chap	ter 13				
8.	How	you will pay the fee	abo	will pay the entire fee when I file my petition. Please check with the clerk's office in your local court for more details bout how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or money order. If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check with pre-printed address.				
				I need to pay the fee in installments. If you choose this option, sign and attach the Application for Individuals to Pay The Filing Fee in Installments (Official Form 103A).				ation for Individuals to Pay
			☐ I re	quest that is not req	it my fee be waiv uired to, waive yo	/ed (You may request this our fee, and may do so only	option only if you are filing for Chap if your income is less than 150% o	of the official poverty line that
							fee in installments). If you choose to (Official Form 103B) and file it with	
9.		you filed for	■ No.					
		ruptcy within the 3 years?	☐ Yes.					
				District		When	Case number	
				District		When	Case number	
				District		When	Case number	
10.	case filed not f you,	any bankruptcy s pending or being by a spouse who is iling this case with or by a business ner, or by an ate?	■ No □ Yes.					
				Debtor			Relationship to y	′ou
				District		When	Case number, if	known
				Debtor			Relationship to y	ou
				District		When	Case number, if	known
11.		ou rent your	□ No.	Go to I	ine 12.			
	resid	lence?	Yes.	Has yo	our landlord obtain	ned an eviction judgment a	gainst you?	
					No. Go to line 12	2.		
					Yes. Fill out <i>Initi</i> bankruptcy petit		ction Judgment Against You (Form	101A) and file it with this

	tor 2 Bradley D Hibner Mourney L Hibner	•		Case number (if known)
art	Report About Any Bu	sinesses	You Own as a Sole Propr	ietor
2.	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to Part 4.	
		☐ Yes.	Name and location of b	usiness
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.		Name of business, if ar	у
	If you have more than one sole proprietorship, use a		Number, Street, City, S	tate & ZIP Code
	separate sheet and attach it to this petition.		Check the appropriate	box to describe your business:
	it to the petition.		• • • •	siness (as defined in 11 U.S.C. § 101(27A))
				eal Estate (as defined in 11 U.S.C. § 101(51B))
			_	defined in 11 U.S.C. § 101(53A))
				ker (as defined in 11 U.S.C. § 101(6))
			☐ None of the abo	
 Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business 		deadline operation	s. If you indicate that you ar	e court must know whether you are a small business debtor so that it can set appropriate to a small business debtor, you must attach your most recent balance sheet, statement of different income tax return or if any of these documents do not exist, follow the procedure
	debtor? For a definition of small	■ No.	I am not filing under Ch	apter 11.
	business debtor, see 11 U.S.C. § 101(51D).	□ No.	I am filing under Chapte Code.	er 11, but I am NOT a small business debtor according to the definition in the Bankruptcy
		☐ Yes.	I am filing under Chapte	er 11 and I am a small business debtor according to the definition in the Bankruptcy Code.
art	4: Report if You Own or	Have Any	y Hazardous Property or <i>A</i>	any Property That Needs Immediate Attention
4.	Do you own or have any	■ No.		
	property that poses or is alleged to pose a threat of imminent and identifiable hazard to	☐ Yes.	What is the hazard?	
	public health or safety? Or do you own any		If immediate attention is	
	property that needs immediate attention?		needed, why is it needed?	·
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where is the property?	
				Number, Street, City, State & Zip Code

Debtor 1 Bradley D Hibner
Debtor 2 Mourney L Hibner

Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

	otor 1 Bradley D Hibner otor 2 Mourney L Hibne				Case nu	umber (if known)	
Par	t 6: Answer These Ques	tions for Rep	orting Purposes				
16.	What kind of debts do you have?		16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by a individual primarily for a personal, family, or household purpose."				
			☐ No. Go to line 16b.				
			Yes. Go to line 17.				
			Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment.				
			☐ No. Go to line 16c.				
			Yes. Go to line 17.				
		16c. S	tate the type of debts you owe th	at are not consur	mer debts or bus	siness debts	
17.	Are you filing under Chapter 7?	□ No. I	am not filing under Chapter 7. Go	to line 18.			
	Do you estimate that after any exempt property is excluded and administrative expenses	_ 103. a	am filing under Chapter 7. Do yo re paid that funds will be availabl				d administrative expenses
	are paid that funds will		No				
	be available for distribution to unsecured creditors?] Yes				
18.	How many Creditors do	1 -49		1 ,000-5,000		□ 25,001-50	,000
	you estimate that you owe?	☐ 50-99		☐ 5001-10,000		☐ 50,001-10	
				□ 10,001-25,0	00	☐ More than	100,000
19.	How much do you estimate your assets to	\$0 - \$50		□ \$1,000,001			001 - \$1 billion
	be worth?	□ \$50,001 - \$100,000 □ \$100,001 - \$500,000			\$10,000,001 - \$50 million \$50,000,001 - \$100 million		☐ \$1,000,000,001 - \$10 billion ☐ \$10,000,000,001 - \$50 billion
			1 - \$1 million		01 - \$500 million		
20.	How much do you estimate your liabilities	□ \$0 - \$50	,000	\$1,000,001			001 - \$1 billion
	to be?	_	- \$100,000 1	□ \$10,000,001 □ \$50,000,001	•	_ ` ' '	10,001 - \$10 billion 100,001 - \$50 billion
			1 - \$500,000 1 - \$1 million		01 - \$500 million		
Par	t 7: Sign Below						
For	you	I have exam	nined this petition, and I declare u	ınder penalty of p	perjury that the i	nformation provided is tr	rue and correct.
			osen to file under Chapter 7, I am es Code. I understand the relief a				
		If no attorned document,	ey represents me and I did not pa I have obtained and read the noti	y or agree to pay ce required by 11	someone who U.S.C. § 342(b	is not an attorney to help b).	me fill out this
		I request re	I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.				
			d making a false statement, conc case can result in fines up to \$25				
		/s/ Bradle	y D Hibner		/s/ Mourney		
		Bradley D Signature of			Mourney L I Signature of D		
		Executed o	January 30, 2020 MM / DD / YYYY		Executed on	January 30, 2020 MM / DD / YYYY	

Debtor 1	Bradley D Hibner		
Debtor 2	Mourney L Hibner	Case number (if known)	
		-	

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Robert C. Hahn, III WSBA	Date	January 30, 2020	
Signature of Attorney for Debtor		MM / DD / YYYY	
Robert C. Hahn, III WSBA 27261			
Printed name			
Robert C. Hahn, III, PS			
Firm name			
2906 N. Argonne Rd.			
Spokane Valley, WA 99212			
Number, Street, City, State & ZIP Code			
Contact phone (509) 921-9500	Email address	rhahn@rhahn.com	
WSBA 27261 WA			
Bar number & State			

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Filli	n this information to identify your case:			
Deb	,			
Deb		e Name Last Name		
		e Name Last Name		
Unite	ed States Bankruptcy Court for the: EASTER	N DISTRICT OF WASHINGTON		
Case	e number			
(if kno			_	c if this is an
			amen	ded filing
~				
	icial Form 106Sum	Hilitiaa and Cantain Otaliatiaal Information		
		bilities and Certain Statistical Information parried people are filing together, both are equally responsible for		12/15
infor	mation. Fill out all of your schedules first; the	en complete the information on this form. If you are filing amend		
your	original forms, you must fill out a new <i>Sumn</i>	nary and check the box at the top of this page.		
Part	1: Summarize Your Assets			
			Your a	
			value	of what you own
1.	Schedule A/B: Property (Official Form 106A/B 1a. Copy line 55, Total real estate, from Schedule 15, Total real estate, f	.) ıle A/B	\$	0.00
	1b. Copy line 62, Total personal property, from	Schedule A/B	\$	8,554.47
	1c. Copy line 63, Total of all property on Sched	ule A/B	\$	8,554.47
Part	2: Summarize Your Liabilities			
			Vour li	abilities
				t you owe
2.	Schedule D: Creditors Who Have Claims Secur		\$	844.02
		unt of claim, at the bottom of the last page of Part 1 of Schedule D	Ψ	044.02
3.	Schedule E/F: Creditors Who Have Unsecured 3a. Copy the total claims from Part 1 (priority u	Claims (Official Form 106E/F) nsecured claims) from line 6e of Schedule E/F	\$	283.00
	3b. Copy the total claims from Part 2 (nonpriori	ty unsecured claims) from line 6j of Schedule E/F	\$	76,791.02
		Your total liabilities	¢	77,918.04
		rour total habilities	Ψ	77,910.04
Part	3: Summarize Your Income and Expenses			
4.	Schedule I: Your Income (Official Form 106I)			
		12 of Schedule I	\$	3,202.00
5.	Schedule J: Your Expenses (Official Form 106) Copy your monthly expenses from line 22c of S) chedule J	\$	3,593.15
Part	4: Answer These Questions for Administr	ative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters	s 7, 11, or 13?		
		t of the form. Check this box and submit this form to the court with yo	ur other sch	nedules.
	■ Yes			
7.	What kind of debt do you have?			
		ts. Consumer debts are those "incurred by an individual primarily for fill out lines 8-9g for statistical purposes, 28 U.S.C. § 159.	a personal,	, family, or

Official Form 106Sum Summary of Your Assets and Liabilities and Certain Statistical Information

page 1 of 2

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the court with your other schedules.

Best Case Bankruptcy

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to

8. **From the** *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

5,111.00

\$

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total	claim
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	283.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	13,538.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	13,821.00

	nation to identify your case and this filing:		
Debtor 1	Bradley D Hibner First Name Middle Name	Last Name	
Debtor 2 (Spouse, if filing)	Mourney L Hibner First Name Middle Name	Last Name	
, , , , ,	nkruptcy Court for the: EASTERN DISTRICT OF WASHI		
			_
Case number _			☐ Check if this is an amended filing
Official Fo	rm 106A/B		
Schedul	e A/B: Property		12/15
think it fits best. E	eparately list and describe items. List an asset only once. If a e as complete and accurate as possible. If two married people e space is needed, attach a separate sheet to this form. On the tion.	are filing together, both are equally responsible	le for supplying correct
Part 1: Describe	Each Residence, Building, Land, or Other Real Estate You Ow	n or Have an Interest In	
1. Do you own or	nave any legal or equitable interest in any residence, building,	land, or similar property?	
No. Go to Pa	12.		
☐ Yes. Where i	· - ·		
Part 2: Describe	Your Vehicles		
	se, or have legal or equitable interest in any vehicles, wees. If you lease a vehicle, also report it on Schedule G: Ex		e any vehicles you own that
3. Cars, vans, tr	ucks, tractors, sport utility vehicles, motorcycles		
■ No			
☐ Yes			
	rcraft, motor homes, ATVs and other recreational vehic ts, trailers, motors, personal watercraft, fishing vessels, sno		
■ No			
☐ Yes			
	ar value of the portion you own for all of your entries fro ave attached for Part 2. Write that number here		\$0.00
Part 3: Describe	Your Personal and Household Items		
Do you own or	have any legal or equitable interest in any of the follow	ng items?	Current value of the portion you own? Do not deduct secured claims or exemptions.
	oods and furnishings ajor appliances, furniture, linens, china, kitchenware		·
Yes. Desc	ribe		
	Household Goods		\$600.00
	levisions and radios; audio, video, stereo, and digital equip cluding cell phones, cameras, media players, games	ment; computers, printers, scanners; music	collections; electronic devices

Official Form 106A/B Schedule A/B: Property page 1

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Best Case Bankruptcy

Debtor 1 Debtor 2	Bradley D Hi Mourney L H				
Yes.	Describe				
		Electronics	\$1,300.00		
Example No		figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, cons, memorabilia, collectibles	oin, or baseball card collections;		
		Collectibles of value	\$100.00		
Example □ No	ent for sports ar es: Sports, photo musical instru Describe	graphic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canc	es and kayaks; carpentry tools;		
		Sports and Hobby equipment	\$400.00		
■ No □ Yes. 11. Clother Examp	oles: Pistols, rifles Describe	s, shotguns, ammunition, and related equipment othes, furs, leather coats, designer wear, shoes, accessories			
		Clothing	\$400.00		
□ No		welry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gem Jewelry	s, gold, silver		
Examp □ No	rm animals oles: Dogs, cats, l Describe	birds, horses			
		Animals, Non-Farm	\$300.00		
■ No	her personal and	d household items you did not already list, including any health aids you did not lis	t		
		of all of your entries from Part 3, including any entries for pages you have attached number here	\$4,100.00		
Part 4: Des	scribe Your Finan	cial Assets			

Do you own or have any legal or equitable interest in any of the following?

Current value of the

Schedule A/B: Property Official Form 106A/B

page 2

Debtor 1 Debtor 2	Bradley D Hi Mourney L H				Case number (if known)	
						portion you own? Do not deduct secured claims or exemptions.
■ No	<i>mples:</i> Money you h	•	our wallet, in your hom	•	d on hand when you file your petition	
Exai	institutions. I			ints; certificates of deposit; s with the same institution, list	hares in credit unions, brokerage houseach.	ses, and other similar
□ No ■ Ye	S			Institution name:		
		17.1.	Checking	Chime		\$259.98
		17.2.	Credit Union	Numerica		\$80.52
		17.3.	Savings	Chime		\$204.26
		17.4.	Checking	Simple		\$0.01
■ Ye	S		Institution or issuer na			\$9.70
10 Non-	nublick traded sta				pusinesses, including an interest in	
	venture	on and	mior dete in moer per	atou and annious postatou .	acinococo, moracing an intoroct in	an 220, paranoromp, and
			about them ne of entity:		% of ownership:	
Neg	otiable instruments	include p	ersonal checks, cash	iable and non-negotiable in iers' checks, promissory not sfer to someone by signing of	es, and money orders.	
■ No □ Ye	s. Give specific info		about them ner name:			
	ement or pension mples: Interests in II			3(b), thrift savings accounts,	or other pension or profit-sharing plan	ns
■ No □ Ye	s. List each account		ely. of account:	Institution name:		
You		d deposit	s you have made so t	hat you may continue servic ublic utilities (electric, gas, w	e or use from a company ater), telecommunications companies	or others
	S			Institution name or indi	vidual:	
23. Annu ■ No		r a period	lic payment of money	to you, either for life or for a	number of years)	
	orm 106A/B			Schedule A/B: Property		page 3

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Debtor 1 Debtor 2	Bradley D Mourney L			C:	ase number (if known)	
☐ Yes		Issuer name and de	escription.			
24. Interest 26 U.S.	t s in an educa C. §§ 530(b)(1	tion IRA, in an acc), 529A(b), and 529	ount in a qualified ABLE progr (b)(1).	am, or under a qual	ified state tuition progran	n.
■ No □ Yes		Institution name and	d description. Separately file the	records of any interes	sts.11 U.S.C. § 521(c):	
	, equitable or	future interests in	property (other than anything	listed in line 1), and	rights or powers exercisa	able for your benefit
■ No □ Yes.	Give specific	information about th	em			
Examp ■ No	oles: Internet d	omain names, webs	secrets, and other intellectual ites, proceeds from royalties and		s	
		information about th				
		s, and other genera ermits, exclusive lic	n intangibles enses, cooperative association h	oldings, liquor license	es, professional licenses	
	•	information about th	em			
Money or	property owe	d to you?				Current value of the portion you own? Do not deduct secured claims or exemptions.
□ No ■ Yes.	Give specific i	nformation about the	em, including whether you alread	y filed the returns and	d the tax years	
			2019 Tax Return		Federal	\$3,900.00
■ No			y, spousal support, child support	, maintenance, divorc	e settlement, property settl	ement
Examp ■ No	oles: Unpaid wa benefits;	unpaid loans you ma	rance payments, disability benefi ade to someone else	ts, sick pay, vacation	pay, workers' compensation	on, Social Security
	Give specific					
	ets in insurand oles: Health, di		ance; health savings account (HS	SA); credit, homeowne	er's, or renter's insurance	
☐ Yes.	Name the insu		each policy and list its value. ame:	Beneficiary	<i>y</i> :	Surrender or refund
		Company na		•		value:
If you a		erty that is due you	I from someone who has died expect proceeds from a life insu	rance policy, or are co	urrently entitled to receive p	
If you a someo	are the benefic	erty that is due you clary of a living trust,		rance policy, or are co	urrently entitled to receive p	

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Schedule A/B: Property

Official Form 106A/B

Best Case Bankruptcy

page 4

Debto Debto			Case number (if known)	
	es. Describe each claim			
34. Ot	ner contingent and unliquidated claims of every nature, inclu	ıding counterclaims o	of the debtor and rights to	set off claims
Δ,	es. Describe each claim			
	y financial assets you did not already list			
Ц,	es. Give specific information			
	dd the dollar value of all of your entries from Part 4, includin or Part 4. Write that number here			\$4,454.47
Part 5:	Describe Any Business-Related Property You Own or Have an Inter	rest In. List any real esta	te in Part 1.	
37. Do	you own or have any legal or equitable interest in any business-relate	ed property?		
■ N	o. Go to Part 6.			
ΠY	es. Go to line 38.			
Part 6:	Describe Any Farm- and Commercial Fishing-Related Property You If you own or have an interest in farmland, list it in Part 1.	Own or Have an Interes	et In.	
46. D c	you own or have any legal or equitable interest in any farm-	or commercial fishin	g-related property?	
	No. Go to Part 7.			
	Yes. Go to line 47.			
Part 7:	Describe All Property You Own or Have an Interest in That You	u Did Not List Above		
_E	you have other property of any kind you did not already list camples: Season tickets, country club membership	?		
ш	es. Give specific information			
54. A	dd the dollar value of all of your entries from Part 7. Write th	at number here		\$0.00
Part 8:	List the Totals of Each Part of this Form			
55. F	art 1: Total real estate, line 2			\$0.00
56. F	art 2: Total vehicles, line 5	\$0.00		<u> </u>
57. F	art 3: Total personal and household items, line 15	\$4,100.00		
58. F	art 4: Total financial assets, line 36	\$4,454.47		
59. F	art 5: Total business-related property, line 45	\$0.00		
60. F	art 6: Total farm- and fishing-related property, line 52	\$0.00		
61. F	art 7: Total other property not listed, line 54 +	\$0.00		
62. T	otal personal property. Add lines 56 through 61	\$8,554.47	Copy personal property to	otal \$8,554.47
63. T	otal of all property on Schedule A/B. Add line 55 + line 62			\$8,554.47

Official Form 106A/B Schedule A/B: Property page 5

ation to identify your o	case:			
Bradley D Hibner	ACTION AND			
First Name	Middle Name	Last Name		
Mourney L Hibner	r			
First Name	Middle Name	Last Name		
kruptcy Court for the:	EASTERN DISTRICT O	F WASHINGTON		
				Check if this is an amended filing
	Bradley D Hibner First Name Mourney L Hibner First Name	First Name Middle Name Mourney L Hibner First Name Middle Name	Bradley D Hibner First Name Middle Name Last Name Mourney L Hibner First Name Middle Name Last Name	Bradley D Hibner First Name Middle Name Last Name Mourney L Hibner First Name Middle Name Last Name

Official Form 106C

Schedule C: The Property You Claim as Exempt

1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.

4/19

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Specific laws that allow exemption 11 U.S.C. § 522(d)(3)
11 U.S.C. § 522(d)(3)
11 U.S.C. § 522(d)(3)
11 U.S.C. § 522(d)(3)
11 U.S.C. § 522(d)(3)
11 U.S.C. § 522(d)(5)
11 U.S.C. § 522(d)(3)

Official Form 106C

Schedule C: The Property You Claim as Exempt

page 1 of 2

Debtor Debtor				Case number (if known)	
Br Sc	ief description of the property and line on chedule A/B that lists this property	Current value of the portion you own Copy the value from Schedule A/B		ount of the exemption you claim eck only one box for each exemption.	Specific laws that allow exemption
	ewelry ne from <i>Schedule A/B</i> : 12.1	\$1,000.00		\$155.98	11 U.S.C. § 522(d)(4)
Δ,,	ie nom denedale AVB. 12.1			100% of fair market value, up to any applicable statutory limit	
	nimals, Non-Farm	\$300.00		\$300.00	11 U.S.C. § 522(d)(3)
Lii	ie nom <i>Schedule Arb.</i> 10.1			100% of fair market value, up to any applicable statutory limit	
	hecking: Chime	\$259.98		\$259.98	11 U.S.C. § 522(d)(5)
Δ,,	ie nom denedale AB. TT.T			100% of fair market value, up to any applicable statutory limit	
-	redit Union: Numerica	\$80.52		\$80.52	11 U.S.C. § 522(d)(5)
LII	Line Horri Scriedule A/B. 11.2			100% of fair market value, up to any applicable statutory limit	
	avings: Chime	\$204.26		\$204.26	11 U.S.C. § 522(d)(5)
LII	ie nom schedule Arb. 17.0			100% of fair market value, up to any applicable statutory limit	
	hecking: Simple	\$0.01		\$0.01	11 U.S.C. § 522(d)(5)
Lii	ie nom <i>Schedule AVB</i> . 17.4			100% of fair market value, up to any applicable statutory limit	
	obinhood 2 Shares \$4.85	\$9.70		\$9.70	11 U.S.C. § 522(d)(5)
Δ,,	ie nom denedale AB. 10.1			100% of fair market value, up to any applicable statutory limit	
	ederal: 2019 Tax Return	\$3,900.00		\$3,900.00	11 U.S.C. § 522(d)(5)
LII	ie IIIIII <i>Schedule PAB</i> . 20.1			100% of fair market value, up to any applicable statutory limit	
	re you claiming a homestead exemption ubject to adjustment on 4/01/22 and every No Yes. Did you acquire the property cove	3 years after that for ca	ases fi	·	,
_	□ No	.ca 2, the exemption wi		,= . a daya barara yaa maa iiila dada	•

☐ Yes

Fill in this inform	ation to identify you	r case:			
Debtor 1	Bradley D Hibne			_	
Dahtar 0	First Name	Middle Name Last Name			
Debtor 2 (Spouse if, filing)	Mourney L Hibn	Middle Name Last Name			
	kruptcy Court for the:				
	, ,			-	
Case number					if this is an led filing
Official Form	106D				.oug
Official Form Schedule I		Who Have Claims Secured	by Propert	У	12/15
is needed, copy the number (if known).		f two married people are filing together, both are equal out, number the entries, and attach it to this form. On			
	-	nis form to the court with your other schedules. You	ı have nothing else t	o report on this form	
_	all of the information	•	a nave nothing else t	o report on this form.	
	Secured Claims				
		nore than one secured claim, list the creditor separately	Column A	Column B	Column C
for each claim. If mo	re than one creditor has	a particular claim, list the other creditors in Part 2. As cal order according to the creditor's name.	Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim	Unsecured portion If any
2.1 Progressiv	e Leasing	Describe the property that secures the claim:	\$844.02	\$1,000.00	\$0.00
Creditor's Name		Jewelry			
256 W Data	a Dr	As of the date you file, the claim is: Check all that apply.			
Draper, UT	84020	Contingent			
Number, Street, 0	City, State & Zip Code	☐ Unliquidated			
		Disputed			
Who owes the deb	ot? Check one.	Nature of lien. Check all that apply.			
☐ Debtor 1 only ☐ Debtor 2 only		An agreement you made (such as mortgage or secu	red		
_	otor 2 only	car loan) Statutory lien (such as tax lien, mechanic's lien)			
Debtor 1 and Deb	e debtors and another	☐ Judgment lien from a lawsuit			
Check if this cla	im relates to a	Other (including a right to offset)			
Date debt was incu	rred	Last 4 digits of account number			
Add the dollar val	ue of your entries in C	olumn A on this page. Write that number here:	\$84	14.02	
If this is the last p Write that number		the dollar value totals from all pages.	\$84	14.02	
Part 2: List Othe	ers to Be Notified fo	r a Debt That You Already Listed			

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

Official Form 106D

Schedule D: Creditors Who Have Claims Secured by Property

page 1 of 1

Fill in this inform	nation to identify your case:					
Debtor 1	Bradley D Hibner					
		Middle Name	Last Name			
Debtor 2	Mourney L Hibner	ICLU N				
(Spouse if, filing)	First Name	Middle Name	Last Name			
United States Ba	nkruptcy Court for the: EAST	ERN DISTRICT OF V	VASHINGTON			
Case number						
(if known)					☐ Check	if this is an
					amend	ded filing
Official Forn	n 106F/F					
	:/F: Creditors Who ⊦	lava Uneacura	nd Claime			12/15
	d accurate as possible. Use Part 1			2 for creditors with NO	NPPIOPITY claims 1	
left. Attach the Con name and case nur	ors Who Have Claims Secured by htinuation Page to this page. If you nber (if known). Il of Your PRIORITY Unsecure	have no information to				
1. Do any credito	ors have priority unsecured claims	against you?				
☐ No. Go to P	Part 2.					
Yes.						
Part 1. If more	e claims in alphabetical order accord than one creditor holds a particular of ation of each type of claim, see the in	claim, list the other credito	ors in Part 3.		Priority amount	Nonpriority amount
2.1 Kirsten	Hibner	Last 4 digits of acc	count number	\$283.00	_	
Priority Cre	editor's Name	_			Ψ	
	V 6th Ave, Apt L106 Heights, WA 99001	When was the deb	t incurred?		_	
	treet City State Zip Code	As of the date you	file, the claim is: Che	ck all that apply		
Who incurred	d the debt? Check one.	☐ Contingent				
Debtor 1 c	only	☐ Unliquidated				
Debtor 2 c	only	☐ Disputed				
Debtor 1 a	and Debtor 2 only	Type of PRIORITY	unsecured claim:			
☐ At least or	ne of the debtors and another	■ Domestic suppo	rt obligations			
Check if t	his claim is for a community deb	☐ Taxes and certa	in other debts you owe	the government		
	subject to offset?		or personal injury while	e you were intoxicated		
■ No		Other. Specify				_
☐ Yes						
Part 2: List A	II of Your NONPRIORITY Unse	ecured Claims				
3. Do any credito	ors have nonpriority unsecured cl	aims against you?				
	ve nothing to report in this part. Sub	-	with your other schedule	es.		
Yes.	<u> </u>		,			
List all of your unsecured clair	r nonpriority unsecured claims in m, list the creditor separately for eac or holds a particular claim, list the ot	h claim. For each claim lis	sted, identify what type	of claim it is. Do not list of	laims already included	in Part 1. If more

Total claim

Official Form 106 E/F

Schedule E/F: Creditors Who Have Unsecured Claims

Page 1 of 16

	Bradley D Hibner Mourney L Hibner	Case number (if known)	
4.1	Ability Recovery Service LLC	Last 4 digits of account number 9684	\$1,308.00
	Nonpriority Creditor's Name PO Box 4031 Wyoming, PA 18644	When was the debt incurred?	
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
	Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	Check if this claim is for a community	☐ Student loans	
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	No	\square Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Medical bills	
4.2	Alltran Financial LP	Last 4 digits of account number 1841	\$8,273.90
	Nonpriority Creditor's Name PO OBX 722220	When was the debt incurred?	
	Tulsa, OK 74170 Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	,	
	☐ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	·	
	☐ At least one of the debtors and another	☐ Disputed Type of NONPRIORITY unsecured claim:	
	_	Student loans	
	■ Check if this claim is for a community debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Student Loans	
4.3	Alpha Recovery Group	Last 4 digits of account number 1437	\$432.39
	Nonpriority Creditor's Name	When we the debt in some 40	
	6912 S Quentin St Unit 10 Englewood, CO 80112	When was the debt incurred?	
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	■ Check if this claim is for a community	Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	\square Debts to pension or profit-sharing plans, and other similar debts	

☐ Yes

Schedule E/F: Creditors Who Have Unsecured Claims

Page 2 of 16

■ Other. Specify Collections for Capital One

	or 1 Bradley D Hibner Or 2 Mourney L Hibner	Case number (if known)	
4.4	Alquist Counseling Services	Last 4 digits of account number	\$45.00
	Nonpriority Creditor's Name 325 S University Rd Spokane, WA 99206	When was the debt incurred?	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	■ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	Other. Specify Medical bills	
4.5	America Collect Nonpriority Creditor's Name	Last 4 digits of account number	\$659.43
	1851 S Alverno Rd Manitowoc, WI 54221	When was the debt incurred?	
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	_ ·	
	☐ At least one of the debtors and another	☐ Disputed Type of NONPRIORITY unsecured claim:	
	<u> </u>	Student loans	
	Check if this claim is for a community debt		
	Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	■ Other. Specify Collections	
4.6	America Collect Nonpriority Creditor's Name	Last 4 digits of account number 4896	\$208.85
	PO BOX 1505 Manitowoc, WI 54221	When was the debt incurred?	
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	·	
	☐ At least one of the debtors and another	☐ Disputed Type of NONPRIORITY unsecured claim:	
	_	Student loans	
	Check if this claim is for a community debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	■ Other Specify Collections	
	50	— Outer, Opecity	

Schedule E/F: Creditors Who Have Unsecured Claims

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	1 Bradley D Hibner 2 Mourney L Hibner	Case number (if known)	
4.7	Americollect, Inc Nonpriority Creditor's Name	Last 4 digits of account number 1615	\$1,775.29
	1851 S Alverno Rd Manitowoc, WI 54220	When was the debt incurred?	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	Поль	
	Debtor 2 only	☐ Contingent	
	■ Debtor 1 and Debtor 2 only	☐ Unliquidated	
	☐ At least one of the debtors and another	☐ Disputed Type of NONPRIORITY unsecured claim:	
		Student loans	
	Check if this claim is for a community debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Medical bills	
4.8	Associated Credit Service	Last 4 digits of account number 7866	\$7,033.00
	Nonpriority Creditor's Name 12815 E Sprague Ave Spokane, WA 99216	When was the debt incurred?	
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	☐ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	■ Check if this claim is for a community	☐ Student loans	
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	■ Other. Specify Collections	
4.9	Associated Credit Service	Last 4 digits of account number 6013	\$1,062.00
	Nonpriority Creditor's Name 12815 E Sprague Ave Spokane, WA 99216	When was the debt incurred?	
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	Check if this claim is for a community	Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	■ Other Specify Collections	
	00	- Other. Specify	

Schedule E/F: Creditors Who Have Unsecured Claims

Page 4 of 16

Mourney L Hibner		
Audit & Adjustment Co Inc	Last 4 digits of account number	\$192.00
Nonpriority Creditor's Name PO Box 1959	When was the debt incurred?	
_ynnwood, WA 98046 Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Vho incurred the debt? Check one.		
Debtor 1 only	Пол	
Debtor 2 only	☐ Contingent	
■ Debtor 1 and Debtor 2 only	☐ Unliquidated	
☐ At least one of the debtors and another	☐ Disputed Type of NONPRIORITY unsecured claim:	
<u></u>	Student loans	
Check if this claim is for a community		
s the claim subject to offset?	Dobligations arising out of a separation agreement or divorce that you did not report as priority claims	
No	☐ Debts to pension or profit-sharing plans, and other similar debts	
Yes	Other. Specify Medical bills	
Bonded Adjustment	Last 4 digits of account number 0621	\$398.00
Nonpriority Creditor's Name	When was the debt incurred?	
Spokane, WA 99201	When was the debt incurred:	
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
■ Check if this claim is for a community	☐ Student loans	
ebt	☐ Obligations arising out of a separation agreement or divorce that you did not	
s the claim subject to offset?	report as priority claims	
No	☐ Debts to pension or profit-sharing plans, and other similar debts	
☐Yes	■ Other. Specify Service Bill	
Bonded Adjustment	Last 4 digits of account number 0208	\$4,814.00
Nonpriority Creditor's Name		
I229 W 1st Ave Spokane, WA 99201	When was the debt incurred?	
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.	у у стана стана врем	
Debtor 1 only	☐ Contingent	
Debtor 2 only		
Debtor 1 and Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	☐ Disputed Type of NONPRIORITY unsecured claim:	
	Student loans	
Check if this claim is for a community		
s the claim subject to offset?	Dobligations arising out of a separation agreement or divorce that you did not report as priority claims	
No	Debts to pension or profit-sharing plans, and other similar debts	

Schedule E/F: Creditors Who Have Unsecured Claims

Page 5 of 16

Bonded Adjustment	Last 4 digits of account number 5657	\$1,269.00
Nonpriority Creditor's Name 1229 W 1st Ave	When was the debt incurred?	
Spokane, WA 99201 Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.	The of the date you me, the stand is. Officer all that apply	
Debtor 1 only	□ o-attracet	
Debtor 2 only	☐ Contingent ☐ Unliquidated	
■ Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
Check if this claim is for a community	Student loans	
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
☐ Yes	Other. Specify Medical bills	
Bonded Adjustment	Last 4 digits of account number 0855	\$470.00
Nonpriority Creditor's Name	Last 4 digits of account number 0855	φ470.00
1229 W 1st Ave Spokane, WA 99201	When was the debt incurred?	
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
Check if this claim is for a community	Student loans	
debt Is the claim subject to offset?	Dobligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
□ Yes	Other. Specify Collections	
CBS Collections	394 2760	\$277.00
Nonpriority Creditor's Name	Last 4 digits of account number 394,2760	Ψ211.00
521 W Maxwell Ave	When was the debt incurred?	
Spokane, WA 99201	- Acceptant for the standard Control of the standard C	
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
Debtor 1 only		
Debtor 2 only	Contingent	
Debtor 1 and Debtor 2 only	Unliquidated	
Debtor 1 and Debtor 2 only At least one of the debtors and another	☐ Disputed Type of NONPRIORITY unsecured claim:	
_	Student loans	
Check if this claim is for a community debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims	
No	\square Debts to pension or profit-sharing plans, and other similar debts	
☐ Yes	■ Other. Specify Collections	

Schedule E/F: Creditors Who Have Unsecured Claims

Page 6 of 16

	or 2 Mourney L Hibner	Case number (if known)	
4.1	Chapman Financial	Last 4 digits of account number 6525	\$306.04
	Nonpriority Creditor's Name PO Box 14693 Spekane WA 99314	When was the debt incurred?	
	Spokane, WA 99214 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	☐ Debtor 1 only ☐ Debtor 2 only	☐ Contingent ☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only □ At least one of the debtors and another	☐ Disputed Type of NONPRIORITY unsecured claim: ☐ Student loans	
	Check if this claim is for a community debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Collections	
4.1	Chapman Financial	Last 4 digits of account number 8798	\$255.47
	Nonpriority Creditor's Name 1424 N Argonne RD Spokane, WA 99212	When was the debt incurred?	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	□ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	■ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Collections	
4.1	Credit Associates Inc	Last 4 digits of account number 4054	\$356.22
	Nonpriority Creditor's Name PO BOX 39 Bend, OR 97709	When was the debt incurred?	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	■ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	lacktriangle Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Collections	
			

Schedule E/F: Creditors Who Have Unsecured Claims

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Creditors Bureau USA	Last 4 digits of account number 9061	\$421.3
Nonpriority Creditor's Name 757 L Street	When was the debt incurred?	
Fresno, CA 93721 Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.	7.6 of the date you me, the stating to officer all that apply	
☐ Debtor 1 only	Пол	
Debtor 2 only	☐ Contingent	
■ Debtor 1 and Debtor 2 only	☐ Unliquidated	
☐ At least one of the debtors and another	☐ Disputed Type of NONPRIORITY unsecured claim:	
_	Student loans	
Check if this claim is for a community debt		
Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
No	☐ Debts to pension or profit-sharing plans, and other similar debts	
Yes	■ Other. Specify Medical bills	
EMBCC	Last 4 digits of account number 2018,7320	\$1,973.5
Nonpriority Creditor's Name PO BOX 731584	When was the debt incurred?	V 1,07010
Dallas, TX 75203		
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
☐ Debtor 1 only	☐ Contingent	
☐ Debtor 2 only	☐ Unliquidated	
■ Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
Check if this claim is for a community	☐ Student loans	
debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims	
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
Yes	Other. Specify Medical bills	
EMBCC Patient Services	Last 4 digits of account number 8190	\$725.0
Nonpriority Creditor's Name		ψ. 20.0
165 Caprice Ct	When was the debt incurred?	
Castle Rock, CO 80109		
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
■ Check if this claim is for a community	☐ Student loans	
debt	\square Obligations arising out of a separation agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims	
No	Debts to pension or profit-sharing plans, and other similar debts	
Yes	■ Other. Specify Medical bills	

Schedule E/F: Creditors Who Have Unsecured Claims

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Enhanced Recovery	Last 4 digits of account number 0096	\$862.00
Nonpriority Creditor's Name B014 Bayberry Rd Jacksonville, FL 32256	When was the debt incurred?	
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.	, , , , , , , , , , , , , , , , , , , ,	
Debtor 1 only	□ outions	
Debtor 2 only	☐ Contingent	
Debtor 1 and Debtor 2 only	Unliquidated	
☐ At least one of the debtors and another	☐ Disputed Type of NONPRIORITY unsecured claim:	
<u></u>	Student loans	
Check if this claim is for a community		
s the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
No	Debts to pension or profit-sharing plans, and other similar debts	
Yes	Other. Specify Collections	
Enhanced Recovery	Last 4 digits of account number 3486	\$464.00
Nonpriority Creditor's Name 8014 Bayberry Rd	When was the debt incurred?	* 101100
Jacksonville, FL 32256	When was the dest incurred:	
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	□ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
Check if this claim is for a community	☐ Student loans	
debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
s the claim subject to offset?	report as priority claims	
No	\square Debts to pension or profit-sharing plans, and other similar debts	
☐ Yes	Other. Specify Service Bill	
First Interstate Bank	Last 4 digits of account number	\$353.83
Nonpriority Creditor's Name		• • • • • • • • • • • • • • • • • • • •
15015 E Sprague Ave Spokane, WA 99216	When was the debt incurred?	
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
Check if this claim is for a community	☐ Student loans	
debt s the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	□ Debts to pension or profit-sharing plans, and other similar debts	
	■ Other. Specify Service Bill	

Schedule E/F: Creditors Who Have Unsecured Claims

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Geico Insurance	Last 4 digits of account number 5084	\$61.40
Nonpriority Creditor's Name 4295 Ocmulgee E Blvd Macon, GA 31295	When was the debt incurred?	
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
Check if this claim is for a community	☐ Student loans	
debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
s the claim subject to offset?	report as priority claims	
No	lacktriangle Debts to pension or profit-sharing plans, and other similar debts	
Yes	Other. Specify Medical bills	
Jay Schmauch	Last 4 digits of account number	\$105.00
Nonpriority Creditor's Name 5915 S Regal St, Ste 311	When was the debt incurred?	—
Spokane, WA 99223 Number Street City State Zip Code	As of the date way file the plains in Check all that apply	
Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
Debtor 1 only		
Debtor 2 only	Contingent	
_	Unliquidated	
Debtor 1 and Debtor 2 only	Disputed	
At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
Check if this claim is for a community	Student loans	
debt s the claim subject to offset?	Dobligations arising out of a separation agreement or divorce that you did not report as priority claims	
No	□ Debts to pension or profit-sharing plans, and other similar debts	
■ No □ Yes	Other. Specify Medical bills	
— 163	Timer. Specify Medical Silic	
Midland Funding LLC	Last 4 digits of account number 7480	\$533.00
Nonpriority Creditor's Name 2800 15th Ave SE Ste 105 Bellevue, WA 98007	When was the debt incurred?	
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	☐ Contingent	
Debtor 2 only	□ Unliquidated	
Debtor 1 and Debtor 2 only	□ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
Check if this claim is for a community	☐ Student loans	
debt s the claim subject to offset?	Dobligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	

Schedule E/F: Creditors Who Have Unsecured Claims

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	2022	
Multicare Nonpriority Creditor's Name	Last 4 digits of account number 2988	\$208.8
PO Box 34883	When was the debt incurred?	
Seattle, WA 98124		
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
Check if this claim is for a community	☐ Student loans	
lebt s the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
No	☐ Debts to pension or profit-sharing plans, and other similar debts	
Yes	Other. Specify Medical bills	
Multicare	Last 4 digits of account number 1091,1199	\$4,647.89
Nonpriority Creditor's Name		Ψ-1,0-11.00
PO Box 5299	When was the debt incurred?	
Гасота, WA 98415		
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
Debtor 1 only		
_	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
Check if this claim is for a community	☐ Student loans	
debt	Obligations arising out of a separation agreement or divorce that you did not	
s the claim subject to offset?	report as priority claims	
No	☐ Debts to pension or profit-sharing plans, and other similar debts	
Yes	■ Other. Specify Medical bills	
Nationwide Recovery	Last 4 digits of account number 3798	\$652.00
Nonpriority Creditor's Name		
1801 E Main Ave	When was the debt incurred?	
Spokane, WA 99202 Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.	Should all that apply	
Debtor 1 only	Continued.	
Debtor 2 only	Contingent	
Debtor 1 and Debtor 2 only	☐ Unliquidated	
	Disputed	
<u> </u>	Type of NONPRIORITY unsecured claim:	
At least one of the debtors and another	Chudant lagra	
☐ At least one of the debtors and another ☐ Check if this claim is for a community	☐ Student loans	
At least one of the debtors and another Check if this claim is for a community	☐ Obligations arising out of a separation agreement or divorce that you did not	
☐ At least one of the debtors and another ☐ Check if this claim is for a community		

Schedule E/F: Creditors Who Have Unsecured Claims

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Nationwide Recovery Systems	Last 4 digits of account number 3492	\$990.00
Nonpriority Creditor's Name 501 Shelley DR, #300 Tyler, TX 75701	When was the debt incurred?	
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
☐ Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
■ Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
Check if this claim is for a community	Student loans	
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
□ Yes	Other. Specify Collections	
Numerica Credit Union	Last 4 digits of account number 0905	\$504.0
Nonpriority Creditor's Name	Last 4 digits of account number 0905	φ504.0
PO Box 4000 Veradale, WA 99037	When was the debt incurred?	
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	☐ Contingent	
☐ Debtor 2 only	☐ Unliquidated	
■ Debtor 1 and Debtor 2 only	☐ Disputed	
lacksquare At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	\square Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	Debts to pension or profit-sharing plans, and other similar debts	
Yes	■ Other. Specify Credit Card Purchases	
Numerica Credit Union	Last 4 digits of account number 0038	\$944.0
Nonpriority Creditor's Name PO Box 4000	When was the debt incurred?	
Veradale, WA 99037 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
Debtor 1 only		
	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	Dobligations arising out of a separation agreement or divorce that you did not report as priority claims	
	τοροιτ αο ριτοτική σιαπτο	
■ No	Debts to pension or profit-sharing plans, and other similar debts	

Schedule E/F: Creditors Who Have Unsecured Claims

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	2 Mourney L Hibner	Case number (if known)	
4.3	Peterson Enterprises Inc	Last 4 digits of account number 7104	\$1,820.00
	Nonpriority Creditor's Name 8817 E Mission Ave, Ste 101 Spokane, WA 99212	When was the debt incurred?	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	☐ Debtor 1 only ☐ Debtor 2 only	☐ Contingent ☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only □ At least one of the debtors and another	☐ Disputed Type of NONPRIORITY unsecured claim: ☐ Student loans	
	■ Check if this claim is for a community debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No □ Yes	Debts to pension or profit-sharing plans, and other similar debts	
	□ Yes	■ Other. Specify Collections for Valley Empire Collections	
4.3 5	Providence Health Services	Last 4 digits of account number	\$28.16
	Nonpriority Creditor's Name PO BOX 3177 Portland, OR 97208-3177	When was the debt incurred?	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	☐ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Medical bills	
4.3	Rockwood	Last 4 digits of account number	\$272.00
	Nonpriority Creditor's Name PO Box 2799 Spokane, WA 99220	When was the debt incurred?	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	☐ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	□ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	■ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Medical bills	

Schedule E/F: Creditors Who Have Unsecured Claims

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	r 1 Bradley D Hibner r 2 Mourney L Hibner	Case number (if known)	
4.3 7	Santander Consumer USA	Last 4 digits of account number	\$14,776.00
	Nonpriority Creditor's Name PO BOX 961245 Foot Worth, TV 76464	When was the debt incurred?	
	Fort Worth, TX 76161 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	□ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	■ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Deficiency Vehicle	
4.3	US Dept of Education	Last 4 digits of account number 1841	\$13,538.00
	Nonpriority Creditor's Name PO BOX 7859 Madison, WI 53704	When was the debt incurred?	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	☐ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	■ Check if this claim is for a community	Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	Other. Specify	
		Student Loans	
4.3 9	Valley Empire Collection Nonpriority Creditor's Name	Last 4 digits of account number 9184	\$2,745.08
	8817 E Mission Ave Ste 101 Spokane, WA 99212	When was the debt incurred?	
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	■ Other. Specify Collections	

Schedule E/F: Creditors Who Have Unsecured Claims

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	or 2 Mourney L Hibner	Case number (if known)	
4.4 0	Valley Empire Collection	Last 4 digits of account number 9184	\$323.00
	Nonpriority Creditor's Name 8817 E Mission Ave Ste 101	When was the debt incurred?	
	Spokane, WA 99212 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	☐ Debtor 1 only ☐ Debtor 2 only	Contingent	
	Debtor 1 and Debtor 2 only	☐ Unliquidated ☐ Disputed	
	☐ At least one of the debtors and another ☐ Check if this claim is for a community	Type of NONPRIORITY unsecured claim: ☐ Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Service Bill	
4.4 1	Valley Empire Collection Nonpriority Creditor's Name	Last 4 digits of account number	\$298.00
	8817 E Mission Ave Ste 101 Spokane, WA 99212	When was the debt incurred?	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	☐ Disputed	
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	■ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Collections	
4.4 2	Valley Empire Collections	Last 4 digits of account number	\$262.00
	Nonpriority Creditor's Name 8817 E Mission, Ste 101 Spokane, WA 99212	When was the debt incurred?	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	☐ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	□ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	■ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Service Bill	

Schedule E/F: Creditors Who Have Unsecured Claims

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Waste Management	Last 4 digits of account number 3006	\$147.3°
Nonpriority Creditor's Name		
PO Box 42150	When was the debt incurred?	
Phoenix, AZ 85080	_	
umber Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Vho incurred the debt? Check one.		
Debtor 1 only	Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	□ Disputed	
At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
Check if this claim is for a community	☐ Student loans	
ebt	☐ Obligations arising out of a separation agreement or divorce that you did not	
s the claim subject to offset?	report as priority claims	
No	Debts to pension or profit-sharing plans, and other similar debts	
□ Yes	■ Other. Specify Service Bill	

Part 3: List Others to Be Notified About a Debt That You Already Listed

5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				•	Total Claim
	6a.	Domestic support obligations	6a.	\$	283.00
Total claims					
from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$	0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$	0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$	0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$	283.00
					Total Claim
Total	6f.	Student loans	6f.	\$	13,538.00
claims from Part 2	6g.	Obligations arising out of a separation agreement or divorce that			0.00
		you did not report as priority claims	6g.	\$	0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$	0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$	63,253.02
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$	76,791.02

Fill in this information to identify your case:							
Debtor 1	Bradley D Hibner						
	First Name	Middle Name	Last Name				
Debtor 2	Mourney L Hibne	r					
(Spouse if, filing)	First Name	Middle Name	Last Name				
United States Ban	kruptcy Court for the:	EASTERN DISTRICT C	F WASHINGTON				
Case number					☐ Check if this is an		
(a. raioini)					amended filing		

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Tyes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

ı	Person or	company with	whom you have the	e contract or lease	State what the contract or lease is for				
2.1									
	Name								
	Number	Street			<u> </u>				
	City		State	ZIP Code	<u> </u>				
2.2									
	Name								
	Number	Street							
	City		State	ZIP Code	_				
2.3	Oity		Oldio	Zii Oddo					
	Name				_				
	Number	Street							
	City		State	ZIP Code	_				
2.4			<u> </u>						
	Name				_				
	Number	Street			_				
	City		State	ZIP Code	<u> </u>				
2.5	City		Oldio	211 0000					
	Name				_				
	Number	Street			_				
	City		State	ZIP Code	<u> </u>				

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

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					•
Fill in th	is information to identify yo	ur case:			
Debtor 1	Bradley D Hibr	Middle Name	Last Name		
Debtor 2			Last Name		
(Spouse if,		Middle Name	Last Name		
United S	states Bankruptcy Court for the	EASTERN DISTRICT OF \	WASHINGTON		
Case nu	mber				
(if known)					☐ Check if this is an amended filing
Sche Codebto		o are also liable for any debts			12/15 rate as possible. If two married needed, copy the Additional Page,
fill it out, your nan	, and number the entries in t ne and case number (if know	the boxes on the left. Attach the vn). Answer every question.	ne Additional Page to	o this page. On the to	pp of any Additional Pages, write
1. D	o you have any codebtors?	(If you are filing a joint case, do	not list either spouse	as a codebtor.	
□ N ■ Y					
Arizo		you lived in a community prop na, Nevada, New Mexico, Puert			
■ Y	es. Did your spouse, former s	pouse, or legal equivalent live w	ith you at the time?		
	□No				
	Yes.				
	In which community s	tate or territory did you live?	-NONE-	Fill in the name a	and current address of that person.
	Name of your spouse, forme Number, Street, City, State &				
in li: Fori	ne 2 again as a codebtor on	ly if that person is a guarantor	or cosigner. Make s	sure you have listed t	ng with you. List the person shown the creditor on Schedule D (Official , Schedule E/F, or Schedule G to fil
	Column 1: Your codebtor Name, Number, Street, City, State an	d ZIP Code		Column 2: The cr Check all schedul	editor to whom you owe the debt es that apply:
3.1	Kirsten Hibner 13660 W 6th Ave, Apt L Airway Heights, WA 99			☐ Schedule D, ☐ Schedule E/F ☐ Schedule G _ Associated Cre	F, line

Schedule H: Your Codebtors

Fill	in this information to ide	ntify your ca	ase:								
Del	btor 1 Bra	adley D H	bner			_					
	btor 2 Mo	urney L F	libner			_					
Uni	ited States Bankruptcy C	ourt for the	EASTERN DISTRICT	OF WASHINGTON							
_	se number nown)							nended plemen	t showi	ng postpetition following date:	chapter
<u>O</u>	fficial Form 10	<u>61</u>					MM / I	DD/ YY	YY		
S	chedule I: Yo	ur Inc	ome								12/15
sup spo atta	plying correct informat buse. If you are separate	ion. If you ed and you this form. (ible. If two married peo are married and not filir r spouse is not filing wi On the top of any addition	ng jointly, and your the thick the second to	spouse i de infori	s liv nati	ing with you on about you	, includ ır spou	le infor se. If m	mation about nore space is i	your needed,
1.	Fill in your employme information.	Fill in your employment information.		Debtor 1			Del	Debtor 2 or non-filing spouse			
		If you have more than one job, attach a separate page with information about additional	Employment status	☐ Employed				■ Employed			
	information about addi		p.cyc.uc	■ Not employed				☐ Not employed			
	employers.		Occupation				Sto	ore Me	mber		
Include part-time, seasonal, on self-employed work.		sonal, or	Employer's name				Pet	tco			
Occupation may include student or homemaker, if it applies.		Employer's address				_	N Sull radale		ld #103 99037		
Pa	rt 2: Give Details	About Mon	How long employed th	nere?				3 1	/lonths	S	
Esti spo	imate monthly income a use unless you are separ	as of the darated.	ate you file this form. If y	v				person	on the	·	J
	List was at i			of and all the second					non-fi	ling spouse	
2.			ry, and commissions (becalculate what the monthly		2.	\$	0	0.00	\$	1,450.00	
3.	Estimate and list mor	nthly overti	me pay.		3.	+\$	0	0.00	+\$	0.00	
4.	Calculate gross Inco	me. Add lir	e 2 + line 3.		4.	\$	0.0	0	\$	1,450.00	

Official Form 106I Schedule I: Your Income page 1

Case number (if known)

				Fo	or Debtor 1		r Debtor 2 or	
	_			_			n-filing spouse	
	Сору	y line 4 here	4.	\$_	0.00	\$_	1,450.00	
5.	List a	all payroll deductions:						
	5a.	Tax, Medicare, and Social Security deductions	5a.	\$	0.00	\$	245.00	
	5b.	Mandatory contributions for retirement plans	5b.	\$	0.00	\$	0.00	
	5c.	Voluntary contributions for retirement plans	5c.	\$	0.00	\$	0.00	
	5d.	Required repayments of retirement fund loans	5d.	\$	0.00	\$	0.00	
	5e.	Insurance	5e.	\$	0.00	\$	0.00	
	5f.	Domestic support obligations	5f.	\$	0.00	\$	0.00	
	5g.	Union dues	5g.	\$	0.00	\$	0.00	
	5h.	Other deductions. Specify:	5h.+	- \$	0.00	+ \$ _	0.00	
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	_ 6.	\$	0.00	\$	245.00	
7.		ulate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$	0.00	\$	1,205.00	
				Ť -	0.00	*-	1,200.00	
8.	8a.	all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total						
		monthly net income.	8a.	\$	0.00	\$	0.00	
	8b.	Interest and dividends	8b.	\$	0.00	\$	0.00	
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.	\$	0.00	\$	0.00	
	8d.	Unemployment compensation	8d.	\$	1,997.00	\$	0.00	
	8e.	Social Security	8e.	\$	0.00	\$-	0.00	
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	8f.	\$	0.00	\$	0.00	
	8g.	Pension or retirement income	_ 8g.	\$	0.00	\$	0.00	
	8h.	Other monthly income. Specify:	8h.+	- \$	0.00	+ \$ _	0.00	
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$_	1,997.00	\$_	0.00	
10	Calci	ulate monthly income. Add line 7 + line 9.	10. \$		1,997.00 + \$	1	205.00 = \$	3,202.00
10.		the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	ιο. Ψ		1,997.00 + ψ_	٠,	<u>203.00</u> - Ψ	3,202.00
11.	State Include other	e all other regular contributions to the expenses that you list in Schedule de contributions from an unmarried partner, members of your household, your friends or relatives. ot include any amounts already included in lines 2-10 or amounts that are not a	depen		•			0.00
12.		the amount in the last column of line 10 to the amount in line 11. The result that amount on the Summary of Schedules and Statistical Summary of Certaines					12. \$	3,202.00
							Combin monthly	ed income
13.	Do yo	ou expect an increase or decrease within the year after you file this form? No.	?					
		Yes. Explain:						

Official Form 106l Schedule I: Your Income page 2

						ı			
13111	in this informa	ation to identify yo	ur case:						
Deb	tor 1	Bradley D Hil	bner			_		if this is:	
Deh	tor 2	Mourney L H	ibnor					n amended filing	ving postpetition chapter
	ouse, if filing)	Woulley L H	ibilei			"			the following date:
Unit	ed States Bankı	ruptcy Court for the:	EASTE	RN DISTRICT OF WAS	SHINGTON		M	IM / DD / YYYY	
Cas	e number								
!	nown)								
Of	fficial Fo	orm 106J							
Sc	chedule	J: Your E	Exper	ises					12/15
Be info	as complete ormation. If m nber (if know	and accurate as nore space is nee n). Answer ever	possible eded, atta y questio	If two married people ch another sheet to the	e are filing together, behis form. On the top of				
Par 1.	Is this a join	ribe Your Housel nt case?	noia						
	☐ No. Go to								
	Yes. Doe	es Debtor 2 live i	n a separ	ate household?					
	■ N □ Y	. •	t file Offici	al Form 106J-2, <i>Exper</i> i	nses for Separate House	ehold of D	ebto	r 2.	
2.	Do you hay	e dependents?	□ No						
	Do not list D Debtor 2.	•	Yes.	Fill out this information for each dependent	•			Dependent's age	Does dependent live with you?
	Do not state	tho							□ No
	dependents				Son			2	Yes
									□ No
					Son			3	Yes
									□ No □ Yes
									☐ Yes
									□ Yes
3.	expenses o	penses include f people other th d your depender	nan $_{\square}$	No Yes					
Est exp	imate your ex		ur bankr	uptcy filing date unles					pter 13 case to report f the form and fill in the
the	lude expense value of suc ficial Form 10	h assistance and	on-cash d have inc	government assistand luded it on <i>Schedule</i>	ce if you know I: Your Income			Your expe	enses
4.		or home ownersh		•	e. Include first mortgage		\$		1,050.00
	. ,	ded in line 4:	J :						
						4 :	Φ.		0.00
		estate taxes erty, homeowner's	Or renter	's insurance		4a. 4b.			0.00 0.00
		emaintenance, rej	•			40. 4c.			0.00
		owner's associati				4d.			0.00
5.	Additional I	mortgage payme	ents for yo	our residence, such as	s home equity loans	5.	\$		0.00

Debtor 1 Debtor 2	Bradley D Hibner Mourney L Hibner	Case num	ber (if known)	
6. Utili t	t les: Electricity, heat, natural gas	6a.	\$	109.00
6b.	Water, sewer, garbage collection	6b.		0.00
6c.	Telephone, cell phone, Internet, satellite, and cable services	6c.	· · · · · · · · · · · · · · · · · · ·	300.00
6d.	Other. Specify:	6d.	· -	0.00
	d and housekeeping supplies	— 7.	\$	800.00
	dcare and children's education costs	8.	\$	160.00
9. Clot	hing, laundry, and dry cleaning	9.	\$	100.00
10. Pers	onal care products and services	10.	\$	125.00
	ical and dental expenses	11.	\$	100.00
	sportation. Include gas, maintenance, bus or train fare.			250.00
	ot include car payments.	12.	· -	350.00
	rtainment, clubs, recreation, newspapers, magazines, and books	13.	\$	125.00
	ritable contributions and religious donations	14.	\$	0.00
15. Insu	rance. ot include insurance deducted from your pay or included in lines 4 or 20.			
	Life insurance	15a.	\$	0.00
	Health insurance	15b.	·	0.00
	Vehicle insurance	15c.	· -	71.00
	Other insurance. Specify:	15d.	·	0.00
	es. Do not include taxes deducted from your pay or included in lines 4 or 20.			0.00
Spec		16.	\$	0.00
	allment or lease payments:			
	Car payments for Vehicle 1	17a.		0.00
17b.	Car payments for Vehicle 2	17b.	\$	0.00
	Other. Specify: Progressive Leasing	17c.	*	20.15
	Other. Specify:	17d.	\$	0.00
	r payments of alimony, maintenance, and support that you did not report as	18.	\$	283.00
	acted from your pay on line 5, Schedule I, Your Income (Official Form 106I). er payments you make to support others who do not live with you.	10.	\$	0.00
Spec		19.	Ψ	0.00
	er real property expenses not included in lines 4 or 5 of this form or on Sche		our Income.	
	Mortgages on other property	20a.		0.00
20b.	Real estate taxes	20b.	\$	0.00
20c.	Property, homeowner's, or renter's insurance	20c.	\$	0.00
20d.	Maintenance, repair, and upkeep expenses	20d.	\$	0.00
20e.	Homeowner's association or condominium dues	20e.	\$	0.00
21. Othe	er: Specify:	21.	+\$	0.00
22 Calc	ulate your monthly expenses			
	Add lines 4 through 21.		\$	3,593.15
	Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2		\$	3,333.13
	Add line 22a and 22b. The result is your monthly expenses.		\$	3,593.15
220.	Add line 22a and 22b. The result is your monthly expenses.		Φ	3,393.13
	ulate your monthly net income.			
	Copy line 12 (your combined monthly income) from Schedule I.	23a.	\$	3,202.00
23b.	Copy your monthly expenses from line 22c above.	23b.	-\$	3,593.15
23c.	Subtract your monthly expenses from your monthly income.	23c.	\$	-391.15
	The result is your monthly net income.	200.	L .	•••••
For e modif	ou expect an increase or decrease in your expenses within the year after yo xample, do you expect to finish paying for your car loan within the year or do you expect your ication to the terms of your mortgage?			se or decrease because of a
■ N				
ПΥ	es. Explain here:			

						İ	
Fill in this info	rmation to identify your	case:					
Debtor 1	Bradley D Hibner						
	First Name	Middle Name	Las	t Name			
Debtor 2	Mourney L Hibne	7					
(Spouse if, filing)	First Name	Middle Name	Las	t Name			
United States B	Sankruptcy Court for the:	EASTERN DISTRICT	OF WASHIN	GTON			
Case number							
(if known)							Check if this is an
							amended filing
Official For Declara	tion About a	ın Individua	l Debt	or's	Schedules		12/15
f two married p	people are filing together	, both are equally resp	onsible for s	upplyi	ng correct information.		
obtaining mone		n connection with a bar			edules. Making a false stat result in fines up to \$250,0		
Sig	gn Below						
Did you p	ay or agree to pay some	one who is NOT an atto	orney to help	you fi	Il out bankruptcy forms?		
■ No							
☐ Yes.	Name of person					, ,	etition Preparer's Notice, nature (Official Form 119)
•	alty of perjury, I declare re true and correct.	that I have read the su	mmary and s	chedu	les filed with this declarati	on and	
X /s/ Bra	adley D Hibner		Х	/s/ M	ourney L Hibner		
	ey D Hibner				rney L Hibner		
	ure of Debtor 1				ture of Debtor 2		
Date	January 30, 2020			Date	January 30, 2020		

Official Form 106Dec

Declaration About an Individual Debtor's Schedules

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Best Case Bankruptcy

Debtor 1	Bradley D Hibne	r		
	First Name	Middle Name	Last Name	
Debtor 2 Spouse if, filing)	Mourney L Hibno	er Middle Name	Last Name	
, , ,	Bankruptcy Court for the:	EASTERN DISTRICT OF	WASHINGTON	
Case number				
(if known)				☐ Check if this is an amended filing
Official F	orm 107			
Statemer	nt of Financial	Affairs for Individ	uals Filing for Bankrupto	2 y 4/
			e filing together, both are equally responis form. On the top of any additional pa	
	wn). Answer every ques			•
Part 1: Give	Details About Your Ma	rital Status and Where You	Lived Before	
. What is yo	our current marital statu	ıs?		
•				
■ Marrie		-		
_				
□ Not m	ed arried	lived anywhere other than w	/here you live now?	
□ Not m	ed arried		here you live now?	
□ Not m During the	ed narried e last 3 years, have you		·	
□ Not m 2. During the □ No ■ Yes. I	ed narried e last 3 years, have you	lived anywhere other than w	·	Dates Debtor 2 lived there
□ Not m 2. During the □ No ■ Yes. I Debtor 1 311 S Me	ed narried e last 3 years, have you List all of the places you li	lived anywhere other than we lived in the last 3 years. Do not be pates Debtor 1	include where you live now.	
□ Not m During the □ No ■ Yes. I Debtor 1 311 S Me Spokane	ed narried e last 3 years, have you List all of the places you li Prior Address: cDonald Rd e, WA 99216	lived anywhere other than we lived in the last 3 years. Do not lived there From-To:	include where you live now. Debtor 2 Prior Address:	lived there ■ Same as Debtor 1

Statement of Financial Affairs for Individuals Filing for Bankruptcy

page 1

Yes. Make sure you fill out *Schedule H: Your Codebtors* (Official Form 106H).

Debtor 1 Debtor 2	•		Case	e number (if known)	
Part 2	Explain the Sources of	Your Income			
Fill i	n the total amount of incom	m employment or from operating e you received from all jobs and a you have income that you receive	all businesses, including part-	time activities.	ndar years?
	No Yes. Fill in the details.				
		Debtor 1		Debtor 2	
		Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
	calendar year: y 1 to December 31, 2019	■ Wages, commissions, bonuses, tips	\$46,618.90	■ Wages, commissions, bonuses, tips	\$1,320.72
		☐ Operating a business		☐ Operating a business	
	calendar year before that y 1 to December 31, 2018		\$50,281.32	☐ Wages, commissions, bonuses, tips	\$0.00
		☐ Operating a business		☐ Operating a business	
■	No Yes. Fill in the details.				
		Debtor 1		Debtor 2	
		Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Sources of income Describe below.	Gross income (before deductions and exclusions)
From Jathe date	nuary 1 of current year u you filed for bankruptcy:	ntil Unemployment	\$1,383.00		
	calendar year: y 1 to December 31, 2019	Food Stamps	\$3,810.00		
		Unemployment	\$3,751.00		
Part 3:	List Certain Payments	You Made Before You Filed for	Bankruptcv		
6 Aro					
D. AI€	No. Neither Debtor 1 n	or 2's debts primarily consume or Debtor 2 has primarily consu for a personal, family, or househo	u <mark>mer debts.</mark> Consumer debts	s are defined in 11 U.S.C. § 10	01(8) as "incurred by an
	•	before you filed for bankruptcy, di	id you pay any creditor a total	I of \$6,825* or more?	
	No. Go to li				
	paid tha not incl	ow each creditor to whom you pai at creditor. Do not include paymer ude payments to an attorney for the	nts for domestic support oblig his bankruptcy case.	ations, such as child support	and alimony. Also, do
	[^] Subject to adjustr	ment on 4/01/22 and every 3 year	s after that for cases filed on	or after the date of adjustmen	τ.

Statement of Financial Affairs for Individuals Filing for Bankruptcy

	otor 1 Bradley D Hi otor 2 Mourney L F			Cas	e number (if known)	
			e primarily consumer del I for bankruptcy, did you pa		ıl of \$600 or more?	?
	■ No.	Go to line 7.				
	□ Yes		lomestic support obligation			you paid that creditor. Do not Also, do not include payments to an
	Creditor's Name and	d Address	Dates of payment	Total amount paid	Amount you still owe	Was this payment for
7.	Insiders include your rof which you are an of a business you operat alimony.	elatives; any general pa fficer, director, person in	control, or owner of 20% o	eral partners; partner r more of their voting	erships of which you	was an insider? but are a general partner; corporation any managing agent, including one for any such as child support and
	Insider's Name and		Dates of payment	Total amount paid	Amount you still owe	Reason for this payment
	Kirsten Hibner 13660 W 6th Ave, Airway Heights, V		Monthly	\$283.00	\$0.00	Child Support
8.	insider? Include payments on o	you filed for bankruptodebts guaranteed or cosinents to an insider		ments or transfer a	ny property on a	ccount of a debt that benefited an
	Insider's Name and	Address	Dates of payment	Total amount paid	Amount you still owe	Reason for this payment Include creditor's name
Pai	t 4: Identify Legal	Actions, Repossession	s, and Foreclosures			
9.	Within 1 year before	you filed for bankruptoncluding personal injury	cy, were you a party in an cases, small claims actions			
	□ No■ Yes. Fill in the de	etails.				
	Case title Case number		Nature of the case	Court or agency		Status of the case
	Peterson Enterpri Mourney L Hibner 18177104B		Garnishment	Spokane Distri PO Box 2352 Spokane, WA 9		□ Pending□ On appeal■ Concluded
	Bradley D Hibner 14-3-01541-9	v Kirsten Hibner	Child Custody/Child Support	Spokane Distri PO Box 2352 Spokane, WA 9		■ Pending □ On appeal □ Concluded

Statement of Financial Affairs for Individuals Filing for Bankruptcy

	otor 1 Bradley D Hibner Mourney L Hibner	Case numbe	「 (if known)	
10.	Within 1 year before you filed for bankru Check all that apply and fill in the details be	uptcy, was any of your property repossessed, foreclose elow.	d, garnished, attached	I, seized, or levied?
	□ No. Go to line 11.			
	Yes. Fill in the information below.			
	Creditor Name and Address	Describe the Property	Date	Value of the
	Orealter Name and Address	besonible the Froperty	Duic	property
		Explain what happened		
	Santander Consumer USA PO BOX 961245	2015 Chevrolet Cruze	9/20/2019	\$14,776.00
	Fort Worth, TX 76161	■ Property was repossessed.		
		☐ Property was foreclosed.		
		☐ Property was garnished.		
		☐ Property was attached, seized or levied.		
	■ No □ Yes. Fill in the details. Creditor Name and Address	Describe the action the creditor took	Date action was	Amount
			taken	
12.	Within 1 year before you filed for bankru court-appointed receiver, a custodian, o No	iptcy, was any of your property in the possession of an r another official?	assignee for the bene	fit of creditors, a
	☐ Yes			
Par	t 5: List Certain Gifts and Contribution	ns		
13.	Within 2 years before you filed for banks ■ No	ruptcy, did you give any gifts with a total value of more	than \$600 per person?	•
	☐ Yes. Fill in the details for each gift.			
	Gifts with a total value of more than \$60 per person	Describe the gifts	Dates you gave the gifts	Value
	Person to Whom You Gave the Gift and Address:			
14.	Within 2 years before you filed for banks ■ No □ Yes. Fill in the details for each gift or or	ruptcy, did you give any gifts or contributions with a tot	al value of more than	\$600 to any charity?
	Gifts or contributions to charities that		Dates you	Value
	more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Cod	•	contributed	Value
Par	t 6: List Certain Losses			
15.	Within 1 year before you filed for bankru or gambling?	ıptcy or since you filed for bankruptcy, did you lose any	thing because of thef	t, fire, other disaster,
	■ No □ Yes. Fill in the details.			
	Describe the property you lost and	Describe any insurance coverage for the loss	Date of your	Value of property
	how the loss occurred	Include the amount that insurance has paid. List pending insurance claims on line 33 of <i>Schedule A/B: Property</i> .	loss	lost

Statement of Financial Affairs for Individuals Filing for Bankruptcy

	otor 1 otor 2	Bradley D Hibner Mourney L Hibner	Ca	ase number	(if known)			
Par	t 7:	List Certain Payments or Transfers						
16.	consu	n 1 year before you filed for bankruptcy, di ulted about seeking bankruptcy or preparir le any attorneys, bankruptcy petition preparer	ng a bankruptcy petition?			rty to anyone you		
		No						
	■ Y	Yes. Fill in the details.						
	Addr Emai	on Who Was Paid ress il or website address on Who Made the Payment, if Not You	Description and value of any prope transferred	rty	Date payment or transfer was made	Amount of payment		
	2906 Spo	ert C. Hahn, III, PS 6 N. Argonne Rd. kane Valley, WA 99212 nn@rhahn.com	Attorney Fees			\$800.00		
17.	 Within 1 year before you filed for bankruptcy, promised to help you deal with your creditors Do not include any payment or transfer that you I 		r to make payments to your creditors		or transfer any prope	rty to anyone who		
	☐ Yes. Fill in the details.							
	Perse Addr	on Who Was Paid ress	Description and value of any prope transferred	rty	Date payment or transfer was made	Amount of payment		
18.	Includinclud	n 2 years before you filed for bankruptcy, of ferred in the ordinary course of your busing le both outright transfers and transfers made alle gifts and transfers that you have already list No	ess or financial affairs? as security (such as the granting of a se					
		on Who Received Transfer	Description and value of property transferred		any property or received or debts change	Date transfer was made		
		on's relationship to you						
		nown gslist	1998 Dodge Ram 1500 4x4	\$2000.00		5/2019		
	Non	e						
19.	benef	n 10 years before you filed for bankruptcy, ficiary? (These are often called asset-protectino No		lf-settled tru	ıst or similar device	of which you are a		
	Nam	e of trust	Description and value of the property transferred					
						made		

Statement of Financial Affairs for Individuals Filing for Bankruptcy

Pa	t 8: List of Certain Financial Accounts, In	struments, Safe Depos	it Boxes, and Sto	orage Units	3			
20.	Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions.							
	■ No □ Yes. Fill in the details.							
	Name of Financial Institution and Address (Number, Street, City, State and ZIP Code)	Last 4 digits of account number	Type of account instrument	int or	Date account was closed, sold, moved, or transferred		Last balance re closing or transfer	
21.	Do you now have, or did you have within 1 cash, or other valuables?	year before you filed fo	or bankruptcy, an	ıy safe dep	osit box or other depos	sitory for	securities,	
	■ No □ Yes. Fill in the details.							
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had ac Address (Number, State and ZIP Code)		Describe t	he contents		you still e it?	
22.	Have you stored property in a storage unit	or place other than you	ır home within 1	year before	e you filed for bankrupt	cy?		
	■ No □ Yes. Fill in the details.							
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or to it? Address (Number, State and ZIP Code)		Describe t	he contents		you still e it?	
Pa	t 9: Identify Property You Hold or Contro	I for Someone Else						
23.	Do you hold or control any property that so for someone.	omeone else owns? Inc	lude any propert	y you borr	owed from, are storing	for, or ho	old in trust	
	■ No □ Yes. Fill in the details.							
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the pro (Number, Street, City,		Describe t	he property		Value	
Pa	rt 10: Give Details About Environmental Inf	Code) formation						
For	the purpose of Part 10, the following definit	ions apply:						
	Environmental law means any federal, state toxic substances, wastes, or material into tregulations controlling the cleanup of these	the air, land, soil, surfac	ce water, ground					
	Site means any location, facility, or propert to own, operate, or utilize it, including disp		environmental la	aw, whethe	er you now own, operat	e, or utili	ze it or used	
	Hazardous material means anything an envhazardous material, pollutant, contaminant		as a hazardous	waste, haz	ardous substance, tox	ic substa	nce,	
Rep	ort all notices, releases, and proceedings th	nat you know about, reg	ardless of when	they occu	rred.			
24.	Has any governmental unit notified you that	at you may be liable or p	ootentially liable	under or ir	violation of an enviror	mental la	aw?	
	■ No □ Yes. Fill in the details.							
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental un Address (Number, ZIP Code)			nmental law, if you t	Date	e of notice	

Statement of Financial Affairs for Individuals Filing for Bankruptcy

page 6

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Best Case Bankruptcy

	otor 1 otor 2	Bradley D Hibner Mourney L Hibner		Ca	se number (if known)					
25.	Have	you notified any governmental unit o	of any release of hazardous material?							
	_	No Yes. Fill in the details.								
		e of site ress (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State ZIP Code)	and	Environmental law, if you know it	Date of notice				
26.	Have	you been a party in any judicial or ad	dministrative proceeding under any er	nvironi	mental law? Include settlements	and orders.				
	_	No Yes. Fill in the details.								
		e Title e Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Na	ture of the case	Status of the case				
Par	rt 11:	Give Details About Your Business of	r Connections to Any Business							
27.	Withi	n 4 years before you filed for bankrup	ptcy, did you own a business or have	any of	the following connections to ar	y business?				
	I	A sole proprietor or self-employed	l in a trade, profession, or other activi	ty, eith	ner full-time or part-time					
	ı	☐ A member of a limited liability com	npany (LLC) or limited liability partner	ship (L	LP)					
	ı	☐ A partner in a partnership								
	ı	☐ An officer, director, or managing executive of a corporation								
	I	☐ An owner of at least 5% of the voting or equity securities of a corporation								
		No. None of the above applies. Go to Part 12.								
	_									
		Business Name Describe the nature of the business Employer Identification number								
	Add: (Numl	ress per, Street, City, State and ZIP Code)	Name of accountant or bookkeepe	er	Do not include Social Security Dates business existed	number or ITIN.				
28.		n 2 years before you filed for bankrup utions, creditors, or other parties.	ptcy, did you give a financial statemer	nt to ar	nyone about your business? Inc	lude all financial				
		No								
		Yes. Fill in the details below.								
	Nam Add		Date Issued							
		per, Street, City, State and ZIP Code)								
Par	rt 12:	Sign Below								
are with	true ai i a bar	nd correct. I understand that making	inancial Affairs and any attachments, a false statement, concealing propert by \$250,000, or imprisonment for up to	y, or o	btaining money or property by fi					
/s/	Bradl	ey D Hibner	/s/ Mourney L Hibner							
		D Hibner e of Debtor 1	Mourney L Hibner Signature of Debtor 2							
Ī		anuary 30, 2020	Date January 30, 202	0						
Did ■ N	•	tach additional pages to Your Staten	nent of Financial Affairs for Individual	ls Filin	g for Bankruptcy (Official Form	107)?				
□ Y										
Did ■ N		ay or agree to pay someone who is no	ot an attorney to help you fill out banl	kruptcy	y forms?					
_		ame of Person Attach the Banki	ruptcy Petition Preparer's Notice, Declar	ation, a	and Signature (Official Form 119).					
Offic	ial Form	n 107 State	ment of Financial Affairs for Individuals Fil	ling for	Bankruptcy	page 7				

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Best Case Bankruptcy

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Debtor 1	Bradley D Hibner
Debtor 2	Mourney L Hibner

Case number (if known)

Fill in this infor	mation to identify your cas	se:	
Debtor 1	Bradley D Hibner First Name	Middle Name Last Name	
Debtor 2	Mourney L Hibner	wildle Name Last Name	
(Spouse if, filing)	First Name	Middle Name Last Name	
United States Ba	ankruptcy Court for the:	ASTERN DISTRICT OF WASHINGTON	
Case number			
(if known)			☐ Check if this is an amended filing
	nt of Intention	for Individuals Filing Under Chap	ter 7 12/15
	re claims secured by your	· · ·	
You must file th	is form with the court with ever is earlier, unless the c	the lease has not expired. in 30 days after you file your bankruptcy petition or by the date court extends the time for cause. You must also send copies to	
	eople are filing together in nd date the form.	a joint case, both are equally responsible for supplying correct	information. Both debtors must
	and accurate as possible.	If more space is needed, attach a separate sheet to this form. Cer (if known).	n the top of any additional pages,
Part 1: List Y	our Creditors Who Have S	ecured Claims	
		1 of Schedule D: Creditors Who Have Claims Secured by Prope	rty (Official Form 106D), fill in the
information b Identify the cr	elow. reditor and the property that	is collateral What do you intend to do with the property the secures a debt?	Did you claim the property as exempt on Schedule C?
Creditor's F	Progressive Leasing	■ Surrender the property.	□ No
name:		☐ Retain the property and redeem it.	=
Description of	Jewelrv	Retain the property and enter into a Reaffirmation Agreement.	Yes
property		☐ Retain the property and [explain]:	
securing debt	:		
For any unexpire	on below. Do not list real e	roperty Leases that you listed in Schedule G: Executory Contracts and Unexp state leases. Unexpired leases are leases that are still in effect; roperty lease if the trustee does not assume it. 11 U.S.C. § 365(the lease period has not yet ended.
Describe your u	unexpired personal proper	ty leases	Will the lease be assumed?
Lessor's name:			□ No
Description of le Property:	ased		☐ Yes
, ,			_ 100
Lessor's name: Description of le	ased		□ No
Property:			☐ Yes
Lessor's name:			
Official Form 108		Statement of Intention for Individuals Filing Under Chapter 7	page 1
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Best Case Bankruptcy

Debtor 1 Bradley D Hibner Debtor 2 Mourney L Hibner	Case number (if known)				
Description of leased Property:	□ No □ Yes				
Lessor's name: Description of leased Property:	□ No □ Yes				
Lessor's name: Description of leased Property:	□ No □ Yes				
Lessor's name: Description of leased Property:	□ No □ Yes				
Lessor's name: Description of leased Property:	□ No □ Yes				
Part 3: Sign Below Under penalty of perjury, I declare that I have indicated my intention about any property of my estate that secures a debt and any personal property that is subject to an unexpired lease.					
X /s/ Bradley D Hibner Bradley D Hibner Signature of Debtor 1	X /s/ Mourney L Hibner Mourney L Hibner Signature of Debtor 2				
Date	Date				

Statement of Intention for Individuals Filing Under Chapter 7

page 2

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Best Case Bankruptcy

	Check one box only as d 122A-1Supp:	irected in this form and	in Form
Debtor 2 (Spouse, if filing) Mourney L Hibner	■ 1. There is no pres	umption of abuse	
United States Bankruptcy Court for the: Eastern District of Washington	applies will be n	o determine if a presum nade under <i>Chapter 7 M</i> icial Form 122A-2).	
Case number(if known)		does not apply now bed service but it could app	
	☐ Check if this is a	n amended filing	
Official Form 122A - 1			
Chapter 7 Statement of Your Current Monthly In	come		12/19
Be as complete and accurate as possible. If two married people are filing together, both are equattach a separate sheet to this form. Include the line number to which the additional information case number (if known). If you believe that you are exempted from a presumption of abuse becqualifying military service, complete and file Statement of Exemption from Presumption of Abuse Part 1: Calculate Your Current Monthly Income	n applies. On the top of a ause you do not have prir	ny additional pages, write narily consumer debts or	your name and because of
What is your marital and filing status? Check one only.			
□ Not married. Fill out Column A, lines 2-11.			
■ Married and your spouse is filing with you. Fill out both Columns A and B, line	es 2-11.		
☐ Married and your spouse is NOT filing with you. You and your spouse are:			
☐ Living in the same household and are not legally separated. Fill out both 0	Columns A and B, lines 2	2-11.	
☐ Living separately or are legally separated. Fill out Column A, lines 2-11; do penalty of perjury that you and your spouse are legally separated under nonb living apart for reasons that do not include evading the Means Test requireme	ankruptcy law that applic	es or that you and your s	
Fill in the average monthly income that you received from all sources, derived during the 6 101(10A). For example, if you are filing on September 15, the 6-month period would be March 1 th the 6 months, add the income for all 6 months and divide the total by 6. Fill in the result. Do not inc spouses own the same rental property, put the income from that property in one column only. If you	rough August 31. If the amount m	ount of your monthly income ore than once. For example	e varied during e, if both
	Column A Debtor 1	Column B Debtor 2 or non-filing spouse	
 Your gross wages, salary, tips, bonuses, overtime, and commissions (before a payroll deductions). 	\$ 3,652.00	\$ 604.00	
3. Alimony and maintenance payments. Do not include payments from a spouse if Column B is filled in.	\$ 0.00	\$	
4. All amounts from any source which are regularly paid for household expenses of you or your dependents, including child support. Include regular contributions			

Official Form 122A-1

Chapter 7 Statement of Your Current Monthly Income

Debtor 1 0.00

Debtor 1

0.00 Copy here -> \$

0.00 Copy here -> \$

0.00

0.00

0.00

-\$

\$

-\$

page 1

Best Case Bankruptcy

0.00

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0.00

0.00

0.00

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from an unmarried partner, members of your household, your dependents, parents, and roommates. Include regular contributions from a spouse only if Column B is not

filled in. Do not include payments you listed on line 3.

5. Net income from operating a business, profession, or farm

Net monthly income from a business, profession, or farm \$

Gross receipts (before all deductions)

Gross receipts (before all deductions)

7. Interest, dividends, and royalties

Ordinary and necessary operating expenses

6. Net income from rental and other real property

Ordinary and necessary operating expenses

Net monthly income from rental or other real property

Case number (if known)

			Column A Debtor 1		Column B Debtor 2 o	or
8. Unemployment compensation			\$	855.00	\$	0.00
Do not enter the amount if you contend that the amount the Social Security Act. Instead, list it here:		t under				
For you \$	0.0	00				
For your spouse \$	0.0					
9. Pension or retirement income. Do not include any ambenefit under the Social Security Act. Also, except as sinot include any compensation, pension, pay, annuity, o United States Government in connection with a disability disability, or death of a member of the uniformed servic pay paid under chapter 61 of title 10, then include that places not exceed the amount of retired pay to which you if retired under any provision of title 10 other than chapter.	tated in the next senter allowance paid by the ty, combat-related injuries. If you received any pay only to the extent the would otherwise be en	nce, do e y or retired nat it	\$	0.00	\$_	0.00
10. Income from all other sources not listed above. Spe Do not include any benefits received under the Social S received as a victim of a war crime, a crime against hur domestic terrorism; or compensation, pension, pay, and United States Government in connection with a disability disability, or death of a member of the uniformed servic sources on a separate page and put the total below.	Security Act; payments manity, or international nuity, or allowance paic ty, combat-related injur	or by the y or				
			\$	0.00	\$	0.00
			\$	0.00	\$	0.00
Total amounts from separate pages, if any.		+	\$	0.00	\$	0.00
11. Calculate your total current monthly income. Add lir each column. Then add the total for Column A to the to		\$	4,507.00	+ \$ _	604.00	= \$ 5,111.00 Total current monthly
Part 2: Determine Whether the Means Test Applies to 12. Calculate your current monthly income for the year.	. Follow these steps:		Cor	ov line 11 l	nore->	\$ 5.111.00
12a. Copy your total current monthly income from line 1	· ·		CO	y ilile i i i	1616->	\$5,111.00_
Multiply by 12 (the number of months in a year)						x 12
12b. The result is your annual income for this part of the	e form				12	b. \$ 61,332.00
13. Calculate the median family income that applies to	you. Follow these step	s:				
Fill in the state in which you live.	WA					
Fill in the number of people in your household.	4					
Fill in the median family income for your state and size To find a list of applicable median income amounts, go for this form. This list may also be available at the bank	online using the link sp	ecified	in the sepai	ate instruc	13 tions	. \$105,568.00
14. How do the lines compare?						
 Line 12b is less than or equal to line 13. O Go to Part 3. Do NOT fill out or file Official Line 12b is more than line 13. On the top of Go to Part 3 and fill out Form 122A-2. 	Form 122A-2.					
Part 3: Sign Below	shout the links was all a	Alado -1		Line auroren		ture and court
By signing here, I declare under penalty of perjury	tnat the information or	this sta	itement and	ı ın any atta	acnments is	true and correct.
X /s/ Bradley D Hibner			rney L Hib			
Bradley D Hibner Signature of Debtor 1			y L Hibne e of Debtor			

Official Form 122A-1

Chapter 7 Statement of Your Current Monthly Income

Debtor 1	Bradley D Hibner		
Debtor 2	Mourney L Hibner	Case number (if known)	
Da	e January 30, 2020	Date January 30, 2020	
	MM/DD/YYYY	MM / DD / YYYY	

If you checked line 14a, do NOT fill out or file Form 122A-2.

If you checked line 14b, fill out Form 122A-2 and file it with this form.

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation	
\$245	filing fee	_
\$75	administrative fee	
+ \$15	trustee surcharge	
\$335	total fee	

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft:

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$550 administrative fee \$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes.

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/ BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

United States Bankruptcy Court Eastern District of Washington

Debtor(s) Debtor(s) Disclosure of Compensation of Attoria	y for the above namer agreed to be paid to ruptcy case is as foll	ed debtor(s) and that to me, for services rendered or	
Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney compensation paid to me within one year before the filing of the petition in bankruptcy, or be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy.	y for the above namer agreed to be paid to ruptcy case is as foll	ed debtor(s) and that to me, for services rendered or	
Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney compensation paid to me within one year before the filing of the petition in bankruptcy, or be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy.	y for the above namer agreed to be paid to ruptcy case is as foll	ed debtor(s) and that to me, for services rendered or	
compensation paid to me within one year before the filing of the petition in bankruptcy, or be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy	or agreed to be paid truptcy case is as foll	to me, for services rendered or	
	\$: to
For legal services, I have agreed to accept		800.00	
Prior to the filing of this statement I have received	\$	800.00	
Balance Due		0.00	
2. \$			
3. The source of the compensation paid to me was:			
■ Debtor □ Other (specify):			
I. The source of compensation to be paid to me is:			
■ Debtor □ Other (specify):			
I have not agreed to share the above-disclosed compensation with any other person ur	nless they are memb	pers and associates of my law f	firm.
☐ I have agreed to share the above-disclosed compensation with a person or persons wh copy of the agreement, together with a list of the names of the people sharing in the co			A
5. In return for the above-disclosed fee, I have agreed to render legal service for all aspects of	of the bankruptcy ca	ase, including:	
 a. Analysis of the debtor's financial situation, and rendering advice to the debtor in detern b. Preparation and filing of any petition, schedules, statement of affairs and plan which n c. Representation of the debtor at the meeting of creditors and confirmation hearing, and d. [Other provisions as needed] 	nay be required;		
By agreement with the debtor(s), the above-disclosed fee does not include the following s Representation of the debtors in any dischargeability actions, bad fa relief from stay actions, contested matters, turn over actions, fraudu actions, US Trustee inquiries, 2004 examinations, audits, or any other	aith filing actions ulent transfer acti	ions, preferential transfer	
CERTIFICATION			
I certify that the foregoing is a complete statement of any agreement or arrangement for pathis bankruptcy proceeding.	payment to me for re	presentation of the debtor(s) in	n
January 30, 2020 /s/ Robert C. Hahn,			
Date Robert C. Hahn, III Signature of Attorney			
Robert C. Hahn, III,	, PS		
2906 N. Argonne R			
Spokane Valley, W. (509) 921-9500 Fa:			
rhahn@rhahn.com			
Name of law firm			

United States Bankruptcy Court Eastern District of Washington

In re	Bradley D Hibner Mourney L Hibner		Case No.	
	mountey Emoner	Debtor(s)	Chapter	7
The abo		TEICATION OF CREDITOR IN that the attached list of creditors is true and contact the attached list of creditors is true and contact the attached list of creditors is true and contact the attached list of creditors is true.		of their knowledge.
Date:	January 30, 2020	/s/ Bradley D Hibner Bradley D Hibner Signature of Debtor		
Date:	January 30, 2020	/s/ Mourney L Hibner Mourney L Hibner		

Signature of Debtor

Bradley D Hibner 11011 E 4th Ave Spokane, WA 99206

Mourney L Hibner 11011 E 4th Ave Spokane, WA 99206

Robert C. Hahn, III WSBA Robert C. Hahn, III, PS 2906 N. Argonne Rd. Spokane Valley, WA 99212

Ability Recovery Service LLC PO Box 4031 Wyoming, PA 18644

Alltran Financial LP PO OBX 722220 Tulsa, OK 74170

Alpha Recovery Group 6912 S Quentin St Unit 10 Englewood, CO 80112

Alquist Counseling Services 325 S University Rd Spokane, WA 99206

America Collect 1851 S Alverno Rd Manitowoc, WI 54221

America Collect PO BOX 1505 Manitowoc, WI 54221 Americollect, Inc 1851 S Alverno Rd Manitowoc, WI 54220

Associated Credit Service 12815 E Sprague Ave Spokane, WA 99216

Audit & Adjustment Co Inc PO Box 1959 Lynnwood, WA 98046

Bonded Adjustment 1229 W 1st Ave Spokane, WA 99201

CBS Collections 521 W Maxwell Ave Spokane, WA 99201

Chapman Financial PO Box 14693 Spokane, WA 99214

Chapman Financial 1424 N Argonne RD Spokane, WA 99212

Credit Associates Inc PO BOX 39 Bend, OR 97709

Creditors Bureau USA 757 L Street Fresno, CA 93721

EMBCC
PO BOX 731584
Dallas, TX 75203

EMBCC Patient Services 165 Caprice Ct Castle Rock, CO 80109

Enhanced Recovery 8014 Bayberry Rd Jacksonville, FL 32256

First Interstate Bank 15015 E Sprague Ave Spokane, WA 99216

Geico Insurance 4295 Ocmulgee E Blvd Macon, GA 31295

Jay Schmauch 5915 S Regal St, Ste 311 Spokane, WA 99223

Kirsten Hibner 13660 W 6th Ave, Apt L106 Airway Heights, WA 99001

Midland Funding LLC 2800 15th Ave SE Ste 105 Bellevue, WA 98007

Multicare PO Box 34883 Seattle, WA 98124 Multicare PO Box 5299 Tacoma, WA 98415

Nationwide Recovery 1801 E Main Ave Spokane, WA 99202

Nationwide Recovery Systems 501 Shelley DR, #300 Tyler, TX 75701

Numerica Credit Union PO Box 4000 Veradale, WA 99037

Peterson Enterprises Inc 8817 E Mission Ave, Ste 101 Spokane, WA 99212

Progressive Leasing 256 W Data Dr Draper, UT 84020

Providence Health Services PO BOX 3177 Portland, OR 97208-3177

Rockwood PO Box 2799 Spokane, WA 99220

Santander Consumer USA PO BOX 961245 Fort Worth, TX 76161

US Dept of Education PO BOX 7859 Madison, WI 53704

Valley Empire Collection 8817 E Mission Ave Ste 101 Spokane, WA 99212

Valley Empire Collections 8817 E Mission, Ste 101 Spokane, WA 99212

Waste Management PO Box 42150 Phoenix, AZ 85080